Attorney Docket No.

Total Pages

First Named Inventor or Application Identifier

PATENT APPLICATION TRANSMITTAL

UTILITY

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W A WATER-FREE PREPARATION PROCESS FOR MULTIMODAL THERMOPLASTIC POLYMER FOAM AND FOAM.										
<b>3</b>	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231					
	Fee Tra	Transmittal Form rit an original, and a duplicate for fee processing)			6. Microfiche Computer Program (Appendix)					
2. 🛚	<ul> <li>Descrip</li> <li>Cross F</li> <li>Stateme</li> <li>Referer</li> <li>Backgro</li> </ul>	arrangement set forth below) stive title of the Invention References to Related Applications and Regarding Fed sponsored R & nee to Microfiche Appendix bund of the Invention	tal Pages <u>29</u> ] s D	7. a b c	(if applied) . Co	ide and/or Amino cable, all necession proputer Readablaper Copy (identicated) atement verifying	ary) e Copy cal to co identity	omputer cop	y)	
	<ul> <li>Brief Summary of the Invention</li> <li>Brief Description of the Drawings (if filed)</li> </ul>		ļ	ACCOMPANYING APPLICATION PARTS						
Detailed Description Claim(s) - Abstract of the Disclosure Drawing(s) (35 USC 113)  Declaration and Power of Attorney [Total Pages				17. Other:						
Ar	nend the	specification by inserting before	e the first line,	the sent	ence: "T	his application	is a			
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Please direct any telephonic communication regarding this a		STATE	underei	- 1 411-	ZIP CODE		-			
		Steven W Mark Steven W. Mork Reg. No.: 48,258 Phone No.: (989) 636-8434 Fax No.: (989) 636-3237	окрупоаноп tO (Пе	undersigh	ed Atlome	ry/Agent for Applica	nts:			

Assistant Commissioner for Patents Washington, D. C. 20231

Attorney's Case No.: 60418A

Application of: Yohannes Chonde et al.

For: A WATER-FREE PREPARATION PROCESS FOR MULTIMODAL THERMOPLASTIC POLYMER FOAM AND FOAM THEREFROM

No. of Drawing Sheets: 2

September 28, 2001

Sir:

Enclosed for filing is the above-identified application. Please charge the estimated fee to our Deposit Account No. 04-1512. An original and 2 copies of this sheet are enclosed.

A. Basic Filing Fee	\$ <u>710.00</u>			
Total Number of Claims	<u>20</u>			
Less (Basic Fee)	<u>20</u>			
B. Extra Claims	$\underline{0} \times \$ 18.00 = \$ \underline{0}$			
Total Number Independent Claims	<u>2</u>			
Less (Basic Fee)	<u>3</u>			
C. Extra Independent Claims	$\underline{0} \times \$ 80.00 = \$\underline{0}$			
D. Multiple Dependent Claims Presented + \$270.00 = \$				
TOTAL FILING FEE (A+B+C+	·D) = \$710.00			

If this estimate is incorrect, please charge or credit our account accordingly.

Respectfully submitted.

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Steven W. Mork Registration No.: 48,258 Phone: (989) 636-8434

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P.O. Box 1967

Midland, MI 48641-1967